

Form CPF M 102: Campaign Finance Report REMUTE ipal Form

2015 Mice Cappaign and Political Finance

Commonwealth of Massachusetts CLERK	SOFFICE	File with	: City or Town Clerk or	Election Commission
Fill in Reporting Period dates: Beginning Date: 1/				
Type of Report: (Check one) Bth day preceding preliminary	1 ☐ 30 day	after election 🗵 y	year-end report	dissolution
Michael S McGonagle Candidate Full Name (if applicable)	Elect Mi	chael McGonagle	mittee Nome	
		Committee Name		
City Council Office Sought and District		Maureen A. McGonagle Name of Committee Treasurer		
39 Newton Ave	39 New	-		
Residential Address		Committee Mailing Address		
Telephone Number (optional):	Telephone	Number (optional):		
SUMMARY BALA	NCE INFO	RMATION:		
Line 1: Ending Balance from previous report		· · · · · · · · · · · · · · · · · · ·	6,550.89	
Line 2: Total receipts this period (page 3, line	11)		0	
Line 3: Subtotal (line 1 plus line 2)			6,550.89	
Line 4: Total expenditures this period (page 5,	line 14)		4,175	
Line 5: Ending Balance (line 3 minus line 4)			2,375.89	
Line 6: Total in-kind contributions this period (page 6)				
Line 7: Total (all) outstanding liabilities (page	Line 7: Total (all) outstanding liabilities (page 7) 5,001.78			
Line 8: Name of bank(s) used: Santander				
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the activity, including all contributions, loans, receipts, expenditures, disbursements, in-ki finance activity of all persons acting under the authority or on behalf of this committee Signed under the penalties of perjury: FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check in Candidate with Committee and no activity independent of the committee	ind contributions a fin accordance of the secondance of the second	nd liabilities for this reporting the the requirements of M.G. (Treasurer's signatu	ng period and represents L. c. 55. re) Date: 1/20	the campaign 0/2015
Icertify that I have examined this report including attached schedules and it is, to activity, of all persons acting under the authority or on behalf of this committee is incurred any liabilities nor made any expenditures on my behalf during this report. Candidate without Committee OR Candidate with independent activity filing I certify that I have examined this report including attached schedules and it is, to finance activity, including contributions, loans, receipts, expenditures, disbursems campaign finance activity of all persons acting under the authority or on behalf of Signed under the penalties of perjury:	n accordance with rting period. og separate report o the best of my kn ents, in-kind contr	the requirements of M.G.L. owledge and belief, a true as ibutions and liabilities for the	c. 55. I have not receive	ed any contributions,

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)
			LANCOUR TO THE PARTY OF THE PAR
ne 9: Total Recei	pts over \$50 (or listed above)		
ne 10: Total Recei	pts \$50 and under* (not listed above)		
ne 11, TOTAL D	ECEIPTS IN THE PERIOD	0	← Enter on page 1, line 2

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.) To Whom Paid				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
4/2014	Michael S. McGonagle	39 Newton Ave	Loan Payment	4,17
				<u></u>
		Line 12: Total Expenditures o	 	
			50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	4,17

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
Management					
· · · · · · · · · · · · · · · · · · ·		Line 15: In-Kind Contributions over \$50 (or listed above)			
		Line 16: In-Kind Contributions \$50 & under (not listed above)			
	Enter on page 1, line 6 → Line 17: TOTAL IN-KIND CONTRIBUTIONS				

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
9/28/2011	Michael S. McGonagle	39 Newton Ave	Loan	867.5
9/19/2013	Michael S. McGonagle	39 Newton Ave	Loan / Post Cards	66.5
9/20/2013	Michael S. McGonagle	39 Newton Ave	Loan / Campaign Signs	1,179.8
9/20/2013	Michael S. McGonagle	39 Newton Ave	Loan / Postage	92
10/8/2013	Michael S. McGonagle	39 Newton Ave	Loan \ Post Cards	539
10/9/2013	Michael S. McGonagle	39 Newton Ave	Loan / Campaign Rally	416.98
10/20/2013	Michael S. McGonagle	39 Newton Ave	Loan / Postage	1,840
Enter on page 1, line 7 → Line 18: TOTAL OUTSTANDING LIABILITIES (ALL) 5,001.78				